Council for Research on International Economic Relations (ICRIER) to assess the impact of organized retail on small retailers and vendors in the unorganized sector keeping in mind the likely growth in the overall market and effect on employment.

**Reduction in quota of foodgrains for Sikkim**

846. SHRI O.T. LEPCHA: Will the Minister of CONSUMER AFFAIRS, FOOD AND PUBLIC DISTRIBUTION be pleased to state:

(a) the quantity of foodgrains being provided to the people of the country particularly in Sikkim State:

(b) whether it is a fact that Government has reduced the present quota of foodgrains *i.e.* rice, wheat, pulses, kerosene, etc. for the Sikkim State;

(c) if so, the details thereof and the reasons therefor; and

(d) the steps taken, so far, by Government for increasing/restoration of foodgrain quota for Sikkim State?

THE MINISTER OF STATE IN THE MINISTRY OF CONSUMER AFFAIRS, FOOD AND PUBLIC DISTRIBUTION (DR. AKHILESH PRASAD SINGH): (a) Under TPDS 119.36 lakh tons of wheat and 273.14 lakh tons of rice have been allocated to States/UTs during 2007-08. Out of this, Sikkim has been allocated 4509 tons of wheat and 41283 tons of rice.

(b) to (d) The details are as follows:

(i) Foodgrains: There has been no change in the quota of allocation of foodgrains for the Below Poverty Line (BPL) and Antyodaya Anna Yojana (AAY) categories, which are being made @ 35 kg. per family per month for the number of households on the basis of poverty estimates of the Planning Commission for 1993-94 and the population projection of Registrar General of India as on 1.3.2000 or the number of families actually identified and ration cards issued by each State/UT, whichever is less.

The allocations of foodgrains for the Above Poverty Line (APL) families have been rationalized, keeping in view the availability of foodgrains in the Central Pool, w.e.f. June, 2006 and April, 2007 respectively, for wheat and rice respectively on the basis of offtake figures for the previous year i.e. 2003-04, 2004-05 & 2005-06. But, in view of peculiar circumstances of NE States and Sikkim APL rice allocation was increased by 1.5 times w.e.f. July, 2007 for these NE States and Sikkim, subject to their entitlement.

Presently, the State of Sikkim is being allocated foodgrains for all accepted number of AAY, BPL and APL families as per their entitlements.

(ii) Pulses: No allocation is made of pulses under TPDS from the Central Pool.

(iii) Kerosene: Kerosene (SKO) is one of items distributed through Public Distribution System (PDS). Allocation of PDS SKO is made by the Government of India to different States/Union Territories (UTs) on a quarterly basis for distribution under

PDS for cooking and illumination only. In accordance with the policy adopted by the Government of India in 2000, SKO allocation for distribution under the PDS was reduced every year begining 2001-2002 till 2003-2004, taking into account the number of LPG connections released in each State/Union Territory. There has been no reduction in the allocation of PDS SKO to States/UTs after the financial year 2004-05. Allocations for 2007-2008 have also been maintained at the same level. The quantity of PDS SKO allocated to the State Government of Sikkim in the year 2007-08 is 5582 MT.

**Long queue in CGHS dispensaries**

847. SHRI RAJEEV CHANDRA SEKHAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that due to the computerization of CGHS allopathic dispensaries in Delhi, the patients particularly the pensioners have been put to extreme hardship as they have to wait for long hours in queues for getting treatment and medicines as most of the doctors are not properly computer trained, leading to serious delays; and

(b) if so, what remedial action is proposed to be taken to tackle this crisis?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) Doctors of CGHS, Delhi have been provided basic training.

Each dispensary has also been provided with two data entry operators for imparting training and assisting dispensary staff.

Beneficiaries may be facing minor inconvenience due to switch over from manually system to online made of functioning of dispensaries.

**Productions of polio vaccine**

848. DR. ABHISHEK MANU SINGHVI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) by when India is going to achieve self-sufficiency in production of the polio vaccine as Government is vigorously pursuing the polio awareness drive all over the country;

(b) whether we are importing the vaccine; and

(c) if so, from where and what is the progress of the indigenous production of vaccine so that we do not have to rely on the import of the said vaccine for too long?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) Office of the DCGI has not received any application concerning indigenous production of the oral polio vaccine. The Indian manufactures are licensed to produce Oral Polio Vaccine (OPV) by blending the imported concentrate bulk of OPV (Type I, II and III). The bulk of polio vaccine is imported from outside countries.